

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE  
2008 MAY 15 AM 10:16

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Employers Mutual Casualty Co Political Action Comm for Responsible State Govt

IMPORTANT: Indicate by # type of committee you are reporting for: 2

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Bruce A. Kelley  
SIGNATURE OF PERSON FILING REPORT

515-345-2950  
TELEPHONE

05-15-08  
DATE SIGNED

I AM FILING A May 19, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 11,111.73

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

1,780.34

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

12,892.07

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

0.00

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 12,892.07

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt

**SCHEDULE****A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/11, 1/25, 2/8, 2/22, 3/6, 3/11, 04/04, 4/18/07	ID# CK#	Norm Anderson Payroll Deductions 814 E Franklin Indianola, IA 50125 8 x \$5.00 =		\$40.00	<input type="checkbox"/>
"	ID# CK#	Monte Ball 304 41st St Des Moines, IA 8 x \$5.00 =		40.00	<input type="checkbox"/>
"	ID# CK#	Jeff Birdsley 3612 80th St Urbandale, IA 50322 8 x \$4.03 =		32.24	<input type="checkbox"/>
"	ID# CK#	Jean Bloomburg 4638 Elm St West Des Moines, IA 50265 8 x \$2.00 =		16.00	<input type="checkbox"/>
"	ID# CK#	Alison Cate 6709 Compton Ct Johnston, IA 8 x \$1.00 =		8.00	<input type="checkbox"/>
"	ID# CK#	Dennis Christy 1801 NW 81st Clive, IA 50325 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Deana Clark 202 S Main Monroe, IA 50170 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	James Clough 2842 Druid Hill Dr Des Moines, IA 50315 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Ken Cumpston 1906 NW 152nd St Clive, IA 50325 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Ray Davis 12926 Timberline Dr Urbandale, IA 50323 8 x \$3.25 =		26.00	<input type="checkbox"/>
SUB-TOTAL				\$ 266.24	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt

SCHEDULE

**A**

(Rev. 07/03)

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1/11, 1/25, 2/08, 2/22, 3/07, 3/21, 4/04, 4/15/08	ID# CK#	Ken Fitzgerald Payroll Deductions 2303 W Girard Ave Indianola, IA 50125 8 x \$3.32 =		\$26.56	<input type="checkbox"/>
"	ID# CK#	Jim Fontanini 929 43rd St West Des Moines, IA 50265 8 x \$7.50 =		60.00	<input type="checkbox"/>
"	ID# CK#	Nancy Green 823 16th St West Des Moines, IA 50265 8 x \$3.50 =		28.00	<input type="checkbox"/>
"	ID# CK#	Ron Hallenbeck 5880 Brentwood Circle Johnston, IA 8 x \$8.75 =		70.00	<input type="checkbox"/>
"	ID# CK#	Larry Hamling 4002 160th Urbandale, IA 50323 8 x \$2.50 =		20.00	<input type="checkbox"/>
"	ID# CK#	Ron Herman 1209 Brentwood Ct Altoona, IA 50009 8 x 2.50 =		20.00	<input type="checkbox"/>
"	ID# CK#	Charles Herrold 4716 67th St Urbandale, IA 50322 8 x \$5.00 =		40.00	<input type="checkbox"/>
"	ID# CK#	Dave Hixenbaugh 4903 Lakewood Dr Norwalk, IA 50211 8 x \$3.84 =		30.72	<input type="checkbox"/>
"	ID# CK#	Richard Hoffmann 717 S 25th Ct West Des Moines, IA 50265 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Kevin Hovick 13560 Lake Shore Dr Clive, IA 50325 8 x \$4.00 =		32.00	<input type="checkbox"/>
SUB-TOTAL				\$ 353.28	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 5  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt

SCHEDULE

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(Rev. 07/03)

MONETARY  
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1/11, 1/25 2/08, 2/22 3/07, 3/16 4/04, 4/18/08	ID# CK#	Ron Jean Payroll Deductions 2214 Ridgewood Dr Altoona, IA 50009 8 x \$6.00 =		\$48.00	<input type="checkbox"/>
"	ID# CK#	Bruce Kelley 14 Glenview Dr Des Moines, IA 50312 8 x \$25.00 =		200.00	<input type="checkbox"/>
"	ID# CK#	Jerry McClelland 9609 Tanglewood Dr Urbandale, IA 50322 8 x \$3.83 =		30.64	<input type="checkbox"/>
"	ID# CK#	Bob Morlan 3404 Wakonda Ct Des Moines, IA 50321 8 x \$10.00 =		80.00	<input type="checkbox"/>
"	ID# CK#	William Murray 1770 Birchwood Circle Waukee, IA 50263 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Robert Neswold 7106 El Rancho Ave Windsor Heights, IA 50322 8 x \$3.07 =		24.56	<input type="checkbox"/>
"	ID# CK#	Ron Paine 10577 Elmcrest Dr West Des Moines, IA 50265 8 x \$4.50 =		36.00	<input type="checkbox"/>
"	ID# CK#	Sean Pelletier 13927 Bryn Mawr Dr Urbandale, IA 50323 8 x \$3.31 =		26.48	<input type="checkbox"/>
"	ID# CK#	Mark Reese 4765 NW Lovington Dr Des Moines, IA 50310 8 x \$4.00 =		32.00	<input type="checkbox"/>
"	ID# CK#	John Schumacher 4718 93rd Urbandale, IA 50322 8 x \$3.83 =		30.64	<input type="checkbox"/>
SUB-TOTAL				\$ 534.32	
TOTAL (If last page of this schedule)				\$	

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Page 3 of 5  
(for Schedule A)

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(Including candidate's personal funds)

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Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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1/11, 1/25 6/08, 6/22, 3/07, 6/21 4/04, 4/18/08	ID# CK#	Herb Suffel Payroll Deductions 990 3rd St Waukee, IA 50263 8 x \$5.00 =		\$40.00	<input type="checkbox"/>
"	ID# CK#	Beech Turner 1654 Thornwood Rd West Des Moines, IA 50265 8 x \$3.25 =		26.00	<input type="checkbox"/>
"	ID# CK#	Ron Zoss 8017 Plum Dr Urbandale, IA 50322 8 x \$3.50 =		28.00	<input type="checkbox"/>
1-3-08	ID# CK#	Kathryn Evans 8350 EP True Pkwy, Unit 4106 West Des Moines, IA 50266 check		60.00	<input type="checkbox"/>
1-10-08	ID# CK#	Denise Mernka 4328 New York Ave Des Moines, IA 50310 check		12.50	<input type="checkbox"/>
2-20-08	ID# CK#	Heather Boustead 7618 Madison Ave Des Moines, IA 50322 check		100.00	<input type="checkbox"/>
4-08-08	ID# CK#	Kristi Johnson 1647 38th St Des Moines, IA 50310 check		50.00	<input type="checkbox"/>
4-8-08	ID# CK#	Jeff Monson 10110 Hickory Ln Urbandale, IA 50322 check		37.50	<input type="checkbox"/>
4-8-08	ID# CK#	Allan Pauley 407 Hartford Ave Des Moines, IA 50315 check		60.00	<input type="checkbox"/>
4-15-08	ID# CK#	Bob Link 214 NE 64th St Des Moines, IA 50327 check		87.50	<input type="checkbox"/>
SUB-TOTAL				\$ 501.50	
TOTAL (if last page of this schedule)				\$	

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(Including candidate's personal funds)

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4-22-08	ID# CK#	Payroll Deductions Ross Sales 724 46th St West Des Moines, IA 50265 check		\$50.00	<input type="checkbox"/>
4-23-08	ID# CK#	Richard Schulz 1620 Green Branch Circle West Des Moines, IA 50265 check		50.00	<input type="checkbox"/>
5-6-08	ID# CK#	Deana Clark P. O. Box 248 Monroe, IA 50170 check		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 125.00	
TOTAL (if last page of this schedule)				\$ 1,780.34	

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